

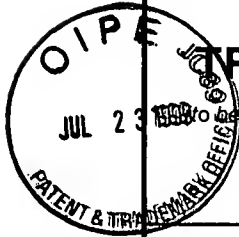
GP 2744

PTO/SB/21(10/96)

Approved for use through 10/31/99. OMB 0651-0031

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM

To be used for all correspondence after initial filing)

| | | | |
|--|---|-------------------------------|----------------|
| TRANSMITTAL FORM To be used for all correspondence after initial filing) | | Application Number | 08/828,370 |
| | | Filing Date | March 28, 1997 |
| | | First Named Inventor | James P. Smith |
| | | Group Art Unit | 2744 |
| | | Examiner Name | W. Trost |
| Total Number of Pages in This Submission | 9 | Attorney Docket Number | 042390.P3973 |

ENCLOSURES (check all that apply)

| | | |
|--|---|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> To Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund | <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below) |
| Remarks | | |

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TECHNICAL CENTER 2700Copies of 2 cited references;
Copy of PCT Written Opinion;
Form PTO-1449

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

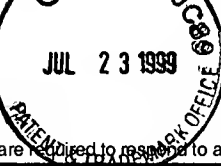
| | | | |
|-------------------------|------------------------------------|--|--|
| Firm or Individual name | Dinu Gruia, Reg. No. 42,996 | | |
| | BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN | | |
| Signature | | | |
| Date | 07/19/99 | | |

CERTIFICATE OF MAILING

| | | | |
|---|---------------|------|----------|
| I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: July 19, 1999 | | | |
| Typed or printed name | Nedy Calderon | | |
| Signature | | Date | 07/19/99 |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

JUL 23 1999



PTO/SB/17 (2/98)

Approved through 09/30/00. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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FEE TRANSMITTAL

Patent fees are subject to annual revision on October 1.

These are the fees effective October 1, 1997.
Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12.
See 37 C.F.R. §§ 1.28 and 1.28**TOTAL AMOUNT OF PAYMENT** (\$) 0.00**Complete if Known**

| | |
|------------------------|----------------|
| Application Number | 08/828,370 |
| Filing Date | 03/28/97 |
| First Named Inventor | James P. Smith |
| Examiner Name | W. Trost |
| Group Art Unit | 2744 |
| Attorney Docket Number | 042390.P3973 |

METHOD OF PAYMENT (check one)

- 1.
- ☒
- The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number 02-2666Deposit Account Name Blakely, Sokoloff, Taylor & Zafman LLP

- ☒
- Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17
- ☐
- Charge the Issue Fee Set in 37 CFR 1.18 at the Mailing of the Notice of Allowance, 37 CFR 1.311(b)

- 2.
- ☐
- Payment Enclosed:
-
- ☐
- Check
- ☐
- Money Order
- ☐
- Other

FEE CALCULATION (fees effective 10/01/96)**1. FILING FEE**

| Large Entity Fee Code | Small Entity Fee Code | Fee Description | Fee Paid |
|-----------------------|-----------------------|------------------------|----------|
| 101 760 201 380 | | Utility filing fee | |
| 106 310 206 155 | | Design filing fee | |
| 107 480 207 240 | | Plant filing fee | |
| 108 760 208 380 | | Reissue filing fee | |
| 114 150 214 75 | | Provisional filing fee | |

SUBTOTAL (1) (\$) _____**2. EXTRA CLAIM FEES**

| Total Claims | Extra Claims | Fee from below | Fee Paid |
|---------------------------|--------------|----------------|----------|
| Independent Claims | ** = | X 18.00 = | \$0.00 |
| Multiple Dependent Claims | ** = | X 78.00 = | \$0.00 |

**or number previously paid, if greater; For Reissues, see below

| Large Entity Fee Code | Small Entity Fee Code | Fee Description |
|-----------------------|-----------------------|---|
| 103 18 203 9 | | Claims in excess of 20 |
| 102 78 202 39 | | Independent claims in excess of 3 |
| 104 270 204 135 | | Multiple Dependent claim |
| 109 78 209 39 | | **Reissue independent claims over original patent |
| 110 18 210 9 | | **Reissue claims in excess of 20 and over original patent |

SUBTOTAL (2) (\$) 0.00**FEE CALCULATION** (continued)**3. ADDITIONAL FEE**

| Large Entity Fee Code | Small Entity Fee Code | Fee Description |
|-----------------------|-----------------------|--|
| 105 130 205 65 | | Surcharge - late filing fee or oath |
| 127 50 227 25 | | Surcharge - late provisional filing fee or cover sheet. |
| 139 130 139 130 | | Non-English specification |
| 147 2,520 147 2,520 | | For filing a request for reexamination |
| 112 920 112 920 | | Requesting publication of SIR prior to Examiner action |
| 113 1,840 113 1,840 | | Requesting publication of SIR after Examiner action |
| 115 110 215 55 | | Extension for response within first month |
| 116 380 216 190 | | Extension for response within second month |
| 117 870 217 435 | | Extension for response within third month |
| 118 1,360 218 680 | | Extension for response within fourth month |
| 128 1,850 228 925 | | Extension for response within fifth month |
| 119 300 219 150 | | Notice of Appeal |
| 120 300 220 150 | | Filing a brief in support of an appeal |
| 121 260 221 130 | | Request for oral hearing |
| 138 1,360 138 1,360 | | Petition to institute a public use proceeding |
| 140 110 240 55 | | Petition to revive - unavoidably |
| 141 1,210 241 605 | | Petition to revive - unintentionally |
| 142 1,210 242 605 | | Utility issue fee (or reissue) |
| 143 430 243 215 | | Design issue fee |
| 144 580 244 290 | | Plant issue fee |
| 122 130 122 130 | | Petitions to the Commissioner |
| 123 50 123 50 | | Petitions related to provisional applications |
| 126 240 126 240 | | Submission of Information Disclosure Stmt |
| 581 40 581 40 | | Recording each patent assignment per property (times number of properties) |
| 146 760 246 380 | | Filing a submission after final rejection (37 CFR 1.129(a)) |
| 149 760 249 380 | | For each additional invention to be examined (37 CFR 1.129(b)) |

Other fee (specify) _____

Other fee (specify) _____

SUBTOTAL (3) (\$) _____

* Reduced by Basic Filing Fee Paid

SUBMITTED BYTyped or Printed Name Dinu Gruia, Reg. No. 42,996Signature Dinu GruiaDate 07/19/99**Complete (if applicable)**

Reg. Number _____

Deposit Account User ID 02-2666

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